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CONFIRMATION NO. 6529

SERIAL NUMBER 10/607,093	FILING OR 371(c) DATE 06/25/2003 RULE	CLASS 705	GROUP ART UNIT 3686	ATTORNEY DOCKET NO.
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## APPLICANTS

Steven Charles Leisher, Rancho Santa Fe, CA;  
 Robert Burnham Batson, Olivenhain, CA;  
 Jeffrey Stratton Patterson, San Diego, CA;  
 Daniel James Miller, San Diego, CA;  
 Richard John Baker, Carlsbad, CA;  
 Howard Bruce Abbott, San Marcos, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/392,556 06/27/2002  
 and claims benefit of 60/408,501 09/03/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
 09/15/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 34	TOTAL CLAIMS 63	INDEPENDENT CLAIMS 20
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

The Potomac Group West  
 c/o Steve Leisher  
 437 S. Highway 101, Ste. 212  
 Solana Beach, CA92075

## TITLE

Method, system and apparatus for forming an insurance program

FILING FEE RECEIVED 1541	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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